

RECEIVED/FILED  
4:35 a.m./p.m.


APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA

Fill in this information to identify your case:

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing)                                                                 
First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Dakota 

Case number 21-40066  
(If known)

☐ Check if this is an amended filing

## Official Form 106Sum

**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1: Summarize Your Assets****Your assets**

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from *Schedule A/B* ..... \$ 0.00

1b. Copy line 62, Total personal property, from *Schedule A/B* ..... \$ 8,584.40

1c. Copy line 63, Total of all property on *Schedule A/B* ..... **\$ 8,584.40**

**Part 2: Summarize Your Liabilities****Your liabilities**

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D* ..... \$ 0.00

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F* ..... \$ 0.00

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F* ..... + \$ 162,204.44

**Your total liabilities****\$ 162,204.44****Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of *Schedule I* ..... \$ 4,608.00

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of *Schedule J* ..... \$ 5,869.00

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 4,664.00

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>90,360.28</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ <u>0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	\$ <u>90,360.28</u>



RECEIVED/FILED  
4:35 a.m./p.m.

APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA☐ Check if this is an  
amended filing

Fill in this information to identify your case:

Debtor 1	Victoria	Irene	Seaman
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Dakota			
Case number (If known)	21-40066		

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.  
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

2.2

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<b>Avant, LLC</b> Nonpriority Creditor's Name <b>P.O. Box 2529</b> Number Street <b>Fort Meyers</b> <b>FL</b> <b>33902</b> City State ZIP Code	Last 4 digits of account number <u>6 7 7 8</u> When was the debt incurred? <u>08/18/2015</u> \$ <u>4,784.06</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Private Loan</u>

4.2	<b>Bank of America</b> Nonpriority Creditor's Name <b>P.O. Box 17054</b> Number Street <b>Wilmington</b> <b>DE</b> <b>19884</b> City State ZIP Code	Last 4 digits of account number <u>1 4 8 1</u> When was the debt incurred? <u>10/01/2014</u> \$ <u>12,181.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card / Consumer Debt</u>

4.3	<b>Capital One Bank USA N.A.</b> Nonpriority Creditor's Name <b>P.O. Box 85520</b> Number Street <b>Richmond</b> <b>VA</b> <b>23285</b> City State ZIP Code	Last 4 digits of account number <u>2 6 2 6</u> When was the debt incurred? <u>03/01/2018</u> \$ <u>1,773.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card / Consumer Debt</u>



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

**Citicards CBNA**

Nonpriority Creditor's Name

P.O. Box 6241

Number Street

Sioux Falls

SD

57117

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 0 7 2 5\$ 2,201.00When was the debt incurred? 04/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card/ Consumer Debt

4.5

**Citibank, NA**

Nonpriority Creditor's Name

P.O. Box 790040

Number Street

St. Louis

MO

63179

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 5 4 3 6\$ 3,593.35When was the debt incurred? 10/01/2016

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card/Consumer Debt

4.6

**Discover Bank**

Nonpriority Creditor's Name

P.O. Box 3025

Number Street

New Albany

OH

43054

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 0 4 3 9\$ 3,219.25When was the debt incurred? 08/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit card/Consumer Debt

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7

**HSBC Bank Nevada NA /Capital One Bank USA NA**

Nonpriority Creditor's Name

P.O. Box 60599

Number Street

Cit of Industry CA 91716

City State ZIP Code

Last 4 digits of account number 0 5 3 6\$ 13,272.11When was the debt incurred? 01/01/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Credit Card/ Consumer Debt

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.8

**JP Morgan Chase Bank N.A.**

Nonpriority Creditor's Name

P.O. Box 15369

Number Street

Wilmington DE 19850

City State ZIP Code

Last 4 digits of account number 4 9 6 4\$ 1,068.96When was the debt incurred? 01/01/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Credit Card/ Consumer Debt

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.9

**PayPal Credit**

Nonpriority Creditor's Name

P.O. Box 960006

Number Street

Orlando FL 32896

City State ZIP Code

Last 4 digits of account number 7 1 0 0\$ 3,837.09When was the debt incurred? 09/01/2017

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Credit / Consumer debt

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10

**National Collegiate Student Loan Trust / Bank of America**

Nonpriority Creditor's Name

1100 N Market St

Number Street

Wilmington

DE

19890

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number P H E A\$ 9,628.22When was the debt incurred? 01/26/2004

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Private Student Loan

4.11

**National Collegiate Student Loan Trust / Bank of America**

Nonpriority Creditor's Name

1100 N Market St

Number Street

Wilmington

DE

19890

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number P H E A\$ 18,444.42When was the debt incurred? 06/22/2004

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Private Student Loan

4.12

**National Collegiate Student Loan Trust / Bank of America**

Nonpriority Creditor's Name

1100 N Market St

Number Street

Wilmington

DE

19890

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number P H E A\$ 15,454.08When was the debt incurred? 08/07/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Private Student Loan



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.13

National Collegiate Student Loan Trust / Bank of America

Nonpriority Creditor's Name

1100 N Market St

Number Street

Wilmington

DE

19890

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number P H E A

\$ 12,620.56

When was the debt incurred? 02/09/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Private Student Loans

4.14

Navient

Nonpriority Creditor's Name

5125 Adanson St Suite 100

Number Street

Orlando

FL

32804

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 7 0 6

\$ 7,957.00

When was the debt incurred? 07/01/2005

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.15

Navient

Nonpriority Creditor's Name

5125 Adanson St Suite 100

Number Street

Orlando

FL

32804

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 7 1 4

\$ 3,526.00

When was the debt incurred? 07/01/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16

**Navient**

Nonpriority Creditor's Name

5125 Adanson St

Number Street

OrlandoFL32804

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 3 6 0 7\$ 13,075.00When was the debt incurred? 06/01/2009

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.17

**TBOM / Milestone Genesis Card Services**

Nonpriority Creditor's Name

P.O. Box 4477

Number Street

BeavertonOR97076

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 2 4 3 3\$ 619.46When was the debt incurred? 06/11/2019

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card / Consumer Debt

4.18

**Thomas A. Blake**

Nonpriority Creditor's Name

505 West Ninth St

Number Street

Sioux FallsSD57104

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number N / A\$ 322.88When was the debt incurred? 11/15/2019

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Fee

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.19

**USAA Savings Bank**

Nonpriority Creditor's Name

P.O. Box 47504

Number Street

San Antonio

TX

78265

City

State

ZIP Code

Last 4 digits of account number 2 6 3 2\$ 15,317.00When was the debt incurred? 01/01/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Credit Card/ Consumer Debt

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.20

**US Dept of Ed/Glelsi**

Nonpriority Creditor's Name

2401 International Ln.

P.O. Box 7860

Number Street

Madison

WI

53704

City

State

ZIP Code

Last 4 digits of account number 8 5 8 1\$ 9,655.00When was the debt incurred? 03/01/2018

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.21

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last NameCase number (if known) 21-40066**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

American Educaiton Services

Name

P.O. Box 61047

Number Street

Harrisburg

City

PA

State

17105

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E AAmerican Education Services

Name

P.O. Box 61047

Number Street

Harrisburg

City

PA

State

17105

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E AAmerican Education Services

Name

P.O. Box 61047

Number Street

Harrisburg

City

PA

State

17105

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E AAmerican Education Services

Name

P.O. Box 61047

Number Street

Harrisburg

City

PA

State

17105

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E AAmerican Coradius International, LLC

Name

2420 Sweet Home Rd

Number Street

STE 150Amherst

City

NY

State

14228

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 7 1 0 0Cawley & Bergmann, LLC

Name

550 Broad St

Number Street

STE 1001Newark

City

NJ

State

07102

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 6 7 7 8Cuzco Capital

Name

11601 Biscayne Blvd.

Number Street

STE 306North Miami

City

FL

State

33181

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 2 4 3 3

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

JHPDE Finance I, LLC

Name

5757 Phantom Drive

Number Street

STE 250Hazelwood

City

MO

State

63042

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 6 7 7 8Messerli & Kramer PA

Name

3033 Campus Drive

Number Street

STE 250Plymouth

City

MN

State

55441

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number 1 4 8 1MRS BPO LLC

Name

1930 Olney Avenue

Number Street

Cherry Hill

City

NJ

State

08003

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number 4 9 6 4MRS BPO LLC

Name

1930 Olney Avenue

Number Street

Cherry Hill

City

NJ

State

08003

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number P H E AMRS BPO LLC

Name

1930 Olney Avenue

Number Street

Cherry Hill

City

NJ

State

08003

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number P H E AMRS BPO LLC

Name

1930 Olney Avenue

Number Street

Cherry Hill

City

NJ

State

08003

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number P H E AMRS BPO LLC

Name

1930 Olney Avenue

Number Street

Cherry Hill

City

NJ

State

08003

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number P H E A

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

National Enterprise Systems

Name

2479 Edison Blvd

Number Street

Unit A

Twinsburg

OH

44087

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E A

National Enterprise Systems

Name

2479 Edison Blvd

Number Street

Unit A

Twinsburg

OH

44087

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E A

National Enterprise Systems

Name

2479 Edison Blvd

Number Street

Unit A

Twinsburg

OH

44087

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E A

National Enterprise Systems

Name

2479 Edison Blvd

Number Street

Unit A

Twinsburg

OH

44087

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number P H E A

Portfolio Recovery Associates

Name

P.O. Box 12914

Number Street

Norfolk

VA

23541

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 5 4 3 6

Portfolio Recovery Associates

Name

P.O. Box 12914

Number Street

Norfolk

VA

23541

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 0 5 3 6

Radius Global Solutions

Name

P.O. Box 390846

Number Street

Minneapolis

MN

55439

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 2 6 3 2



Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Rodenburg Law Firm

Name

P.O. Box 2427

Number Street

Fargo

City

ND

State

58108

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured ClaimsLast 4 digits of account number 0 4 3 9Rodenburg Law Firm

Name

P.O. Box 2427

Number Street

Fargo

City

ND

State

58108

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number 0 5 3 6

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		<b>Total claim</b>	
<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a.	\$ 0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$ 0.00

		<b>Total claim</b>	
<b>Total claims from Part 2</b>	6f. Student loans	6f.	\$ 90,360.28
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$	71,844.16
	6j. Total. Add lines 6f through 6i.	6j.	\$ 162,204.44




APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA

Fill in this information to identify your case:

Debtor 1	Victoria	Irene	Seaman
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: District of South Dakota 

Case number (If known) 21-40066

☐ Check if this is an amended filing

## Official Form 106H

**Schedule H: Your Codebtors**

12/15

**Codebtors** are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

\_\_\_\_\_  
Name of your spouse, former spouse, or legal equivalent

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Bill Seaman  
Name  
701 Vine St.  
Number Street  
Chelsea OK 74016  
City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☒ Schedule E/F, line 4.3
☐ Schedule G, line \_\_\_\_\_

3.2  
Name  
Number Street  
City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.3  
Name  
Number Street  
City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_




RECEIVED/FILED  
4:35 a.m./p.m.

APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA

Fill in this information to identify your case:

Debtor 1	<u>Victoria</u>	<u>Irene</u>	<u>Seaman</u>
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
Debtor 2 (Spouse, if filing)			
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
United States Bankruptcy Court for the: District of South Dakota 			
Case number (If known)	<u>21-40066</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

12/15

Official Form 106I

**Schedule I: Your Income**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

- ☒ Employed  
☐ Not employed

- ☐ Employed  
☐ Not employed

**Occupation**Self-employed**Employer's name**Victoria Seaman**Employer's address**7504 South Kenton Lane

Number Street

Number Street

Sioux Falls SD 57108

City State ZIP Code

City State ZIP Code

How long employed there? 2.7 yrs**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>650.00</u>	\$ _____
3. Estimate and list monthly overtime pay.	3. + \$ <u>0.00</u>	+ \$ _____
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>650.00</u>	\$ _____

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 650.00	\$
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 17.00	\$
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$
5e. Insurance	5e. \$ 25.00	\$
5f. Domestic support obligations	5f. \$ 0.00	\$
5g. Union dues	5g. \$ 0.00	\$
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 42.00	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 608.00	\$
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$
8b. Interest and dividends	8b. \$ 0.00	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$
8d. Unemployment compensation	8d. \$ 0.00	\$
8e. Social Security	8e. \$ 0.00	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Contributions from unmarried partner.	8f. \$ 0.00	\$
8g. Pension or retirement income	8g. \$ 0.00	\$
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 608.00	\$ 608.00
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Contributions from unmarried partner.		
	11. + \$	4,000.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.	\$ 4,608.00 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: Potential temporary increase if the pending PUA is approved.		



RECEIVED/FILED  
4:35 a.m./p.m.

APR 05 2021

Fill in this information to identify your case:

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Dakota

Case number 21-40066  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA

## Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Your Household

## 1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

## 2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Child

4

☐ No

☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?
- ☐ No
- ☒ Yes

## Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Your expenses

4. \$ 83.00

4a. \$ 550.00

4b. \$ 166.00

4c. \$ 35.00

4d. \$ 0.00

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**Your expenses**

- |   |      |    |                 |
|---|------|----|-----------------|
| 5. Additional mortgage payments for your residence, such as home equity loans   | 5.   | \$ | <u>0.00</u>     |
| 6. Utilities:   |      |    |                 |
| 6a. Electricity, heat, natural gas  | 6a.  | \$ | <u>300.00</u>   |
| 6b. Water, sewer, garbage collection  | 6b.  | \$ | <u>125.00</u>   |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.  | \$ | <u>230.00</u>   |
| 6d. Other. Specify: _____   | 6d.  | \$ | <u>0.00</u>     |
| 7. Food and housekeeping supplies   | 7.   | \$ | <u>1,100.00</u> |
| 8. Childcare and children's education costs   | 8.   | \$ | <u>900.00</u>   |
| 9. Clothing, laundry, and dry cleaning  | 9.   | \$ | <u>75.00</u>    |
| 10. Personal care products and services   | 10.  | \$ | <u>85.00</u>    |
| 11. Medical and dental expenses   | 11.  | \$ | <u>50.00</u>    |
| 12. Transportation. Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12.  | \$ | <u>250.00</u>   |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.  | \$ | <u>80.00</u>    |
| 14. Charitable contributions and religious donations  | 14.  | \$ | <u>30.00</u>    |
| 15. Insurance.<br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |      |    |                 |
| 15a. Life insurance   | 15a. | \$ | <u>50.00</u>    |
| 15b. Health insurance   | 15b. | \$ | <u>150.00</u>   |
| 15c. Vehicle insurance  | 15c. | \$ | <u>110.00</u>   |
| 15d. Other insurance. Specify: _____  | 15d. | \$ | <u>0.00</u>     |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: _____  | 16.  | \$ | <u>0.00</u>     |
| 17. Installment or lease payments:  |      |    |                 |
| 17a. Car payments for Vehicle 1   | 17a. | \$ | <u>0.00</u>     |
| 17b. Car payments for Vehicle 2   | 17b. | \$ | <u>0.00</u>     |
| 17c. Other. Specify: <u>Student Loans</u>   | 17c. | \$ | <u>1,200.00</u> |
| 17d. Other. Specify: _____  | 17d. | \$ | <u>0.00</u>     |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.  | \$ | <u>0.00</u>     |
| 19. Other payments you make to support others who do not live with you.<br>Specify: _____   | 19.  | \$ | <u>0.00</u>     |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   |      |    |                 |
| 20a. Mortgages on other property  | 20a. | \$ | <u>0.00</u>     |
| 20b. Real estate taxes  | 20b. | \$ | <u>0.00</u>     |
| 20c. Property, homeowner's, or renter's insurance   | 20c. | \$ | <u>0.00</u>     |
| 20d. Maintenance, repair, and upkeep expenses   | 20d. | \$ | <u>0.00</u>     |
| 20e. Homeowner's association or condominium dues  | 20e. | \$ | <u>0.00</u>     |



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

21. Other. Specify: Gym, Cont. ed, Misc. expenses

21. +\$ 300.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 5,869.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ 0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 5,869.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 4,608.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 5,869.00

23c. Subtract your monthly expenses from your monthly income.  
 The result is your *monthly net income*.

23c. \$ -1,261.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

RECEIVED/FILED  
4:35 a.m./p.m.


APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA☒ Check if this is an  
amended filing

Fill in this information to identify your case:

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing)                       
First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Dakota 

Case number 21-40066  
 (If known)

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and  
 Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and  
 that they are true and correct.

x Victoria Seaman  
 Signature of Debtor 1

x \_\_\_\_\_  
 Signature of Debtor 2

Date 04/05/2021  
 MM / DD / YYYY

Date \_\_\_\_\_  
 MM / DD / YYYY


RECEIVED/FILED  
4:35 a.m./p.m.

APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA

Fill in this information to identify your case:

Debtor 1	Victoria	Irene	Seaman
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: District of South Dakota 

Case number (if known) 21-40066

☐ Check if this is an amended filing

## Official Form 107

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- ☐ Married  
☒ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**Debtor 1:****Dates Debtor 1  
lived there****Debtor 2:****Dates Debtor 2  
lived there**

Number Street

From \_\_\_\_\_  
To \_\_\_\_\_

Number Street

From \_\_\_\_\_  
To \_\_\_\_\_

City State ZIP Code

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

From \_\_\_\_\_  
To \_\_\_\_\_

Number Street

From \_\_\_\_\_  
To \_\_\_\_\_

City State ZIP Code

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)**

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

**Part 2: Explain the Sources of Your Income**



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 1,396.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$
<b>For last calendar year:</b> (January 1 to December 31, <u>2020</u> ) <small>YYYY</small>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 11,168.64	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2019</u> ) <small>YYYY</small>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 4,913.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>		\$		\$
		\$		\$
		\$		\$
<b>For last calendar year:</b> (January 1 to December 31, <u>2020</u> ) <small>YYYY</small>	Unemployment	\$ 12,179.00		\$
		\$		\$
		\$		\$
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2019</u> ) <small>YYYY</small>		\$		\$
		\$		\$
		\$		\$



Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.*

☒ No

☐ Yes. List all payments to an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Number Street		\$	\$	
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

*Include payments on debts guaranteed or cosigned by an insider.*

☒ No

☐ Yes. List all payments that benefited an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Number Street		\$	\$	
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No  
☒ Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title <u>Lisa David vs.</u> <u>Victoria Seaman</u> Case number <u>20-1025</u>	<u>Lincoln County</u> <small>Court Name</small> <u>104 N Main St</u> <small>Number Street</small> <u>Canton</u> <u>SD</u> <u>57013</u> <small>City State ZIP Code</small>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title <u>Bank of America vs.</u> <u>Victoria Seaman</u> Case number <u>19-146585</u>	<u>Lincoln County</u> <small>Court Name</small> <u>104 N Main St</u> <small>Number Street</small> <u>Canton</u> <u>SD</u> <u>57103</u> <small>City State ZIP Code</small>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name _____ Number Street _____ City _____ State _____ ZIP Code _____		\$ _____
<b>Explain what happened</b> <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name _____ Number Street _____ City _____ State _____ ZIP Code _____		\$ _____
<b>Explain what happened</b> <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☐ No  
☒ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Department of the Treasury Internal Revenue Service Number Street Cincinnati OH 45999 City State ZIP Code	2020 overpayment applied to unpaid balance from 2016 taxes.	03/15/2021	\$ 1,527.08

Last 4 digits of account number: XXXX- 1 1 5 2

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			\$
			\$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			\$
			\$



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
			\$
Number Street			
City State ZIP Code			

**Part 6: List Certain Losses**

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

- ☒ No  
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			\$

**Part 7: List Certain Payments or Transfers**

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☒ No  
☐ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Number Street			\$
			\$
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid _____ Number Street _____ _____ City State ZIP Code _____ Email or website address _____ Person Who Made the Payment, if Not You _____	_____	\$ _____
	_____	\$ _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  
 Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid _____ Number Street _____ _____ City State ZIP Code _____	_____	\$ _____
	_____	\$ _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  
 Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer _____ Number Street _____ _____ City State ZIP Code _____ Person's relationship to you _____		_____
Person Who Received Transfer _____ Number Street _____ _____ City State ZIP Code _____ Person's relationship to you _____		_____

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date transfer was made

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____		\$ _____
Name of Financial Institution Number Street City State ZIP Code	XXXX-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____		\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☒ No  
☐ Yes. Fill in the details.

Who else has or had access to it?		Describe the contents	Do you still have it?
Name of Storage Facility	Name		<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street		
City State ZIP Code			
City	State ZIP Code		

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- ☒ No  
☐ Yes. Fill in the details.

Where is the property?		Describe the property	Value
Owner's Name			\$
Number Street	Number Street		
City State ZIP Code			
City	State ZIP Code		

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- ☐ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☐ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☐ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No  
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
City State ZIP Code			
City	State ZIP Code		



Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**25. Have you notified any governmental unit of any release of hazardous material?**

- ☒ No  
☐ Yes. Fill in the details.

Name of site		Governmental unit	Environmental law, if you know it	Date of notice
Number	Street	Number	Street	
City		City	State	ZIP Code

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No  
☐ Yes. Fill in the details.

Case title	Court or agency	Nature of the case	Status of the case
	Court Name		<input type="checkbox"/> Pending
	Number		<input type="checkbox"/> On appeal
	City		<input type="checkbox"/> Concluded

**Part 11: Give Details About Your Business or Connections to Any Business**

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☐ No. None of the above applies. Go to Part 12.  
☒ Yes. Check all that apply above and fill in the details below for each business.

<b>Victoria Seaman</b> Business Name <b>7504 S Kenton Lane</b> Number Street  <b>Sioux Falls SD 57108</b> City State ZIP Code	Describe the nature of the business DBA Guardian Risk Management Consulting Name of accountant or bookkeeper <b>Victoria Seaman</b>	Employer Identification number Do not include Social Security number or ITIN. EIN: <u>8 3 - 1 9 5 5 4 7 1</u> Dates business existed From <u>09/13/2018</u> To <u>Present</u>
Business Name Number Street City State ZIP Code	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____

**RE: Victoria Irene Seaman**  
**United States Bankruptcy Court for the District of South Dakota**  
**Case Number 21-40066**

**Overflow – Statement of Financial Affairs for Individuals Filing for Bankruptcy - Official Form 107**

Case title: Discover Bank vs. Victoria Seaman

Case number: 279875-154

Nature of case: Debt collection action

Court name: Lincoln County

Address: 104 North Main Street, Canton, SD 57013

Status of the case: Pending

Case title: Portfolio Recovery Associates, LLC vs. Victoria Seaman

Case number: 41CIV21-000049

Nature of case: Debt collection action

Court name: Lincoln County

Address: 104 North Main Street, Canton, SD 57013

Status of the case: Pending

---END---

Debtor 1 Victoria Irene Seaman  
 First Name Middle Name Last Name

Case number (if known) 21-40066

Describe the nature of the business Business Name _____ Number Street _____ City State ZIP Code _____		Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
Name of accountant or bookkeeper _____ _____ _____		

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No  
☐ Yes. Fill in the details below.

Date issued

Name \_\_\_\_\_ MM/DD/YYYY  
 Number Street \_\_\_\_\_  
 City State ZIP Code \_\_\_\_\_

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x Victoria Seaman  
 Signature of Debtor 1

x \_\_\_\_\_  
 Signature of Debtor 2

Date 04/05/2021

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☐ No  
☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?


☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing)                                                                 
First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Dakota 

Case number 21-40066  
 (If known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

## Official Form 122A-1

## Chapter 7 Statement of Your Current Monthly Income

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

RECEIVED/FILED  
4:35 a.m./p.m.

## Part 1: Calculate Your Current Monthly Income

APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA

## 1. What is your marital and filing status? Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 4,000.00	\$
5. Net income from operating a business, profession, or farm	Debtor 1 Gross receipts (before all deductions) \$566.00 Ordinary and necessary operating expenses - \$269.00 Net monthly income from a business, profession, or farm \$297.00	Debtor 2 \$ \$ \$ \$
6. Net income from rental and other real property	Debtor 1 Gross receipts (before all deductions) \$ 0.00 Ordinary and necessary operating expenses - \$ 0.00 Net monthly income from rental or other real property \$ 0.00	Debtor 2 \$ \$ \$ \$
7. Interest, dividends, and royalties	\$ 0.00	\$



Debtor 1

Victoria

Irene

Seaman

First Name

Middle Name

Last Name

Case number (if known) 21-40066

Column A  
Debtor 1Column B  
Debtor 2 or  
non-filing spouse

## 8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  $\downarrow$ 

For you ..... \$ 0.00

For your spouse ..... \$ 0.00

\$ 367.00

\$

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0.00

\$

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ 0.00

\$

\$ 0.00

\$

+ \$ 0.00

+ \$

Total amounts from separate pages, if any.

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 4,664.00

+

\$ 0.00

=

\$ 4,664.00

Total current  
monthly income**Part 2: Determine Whether the Means Test Applies to You**

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11. .... Copy line 11 here  $\rightarrow$ 

\$ 4,664.00

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$ 55,968.00

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

South Dakota

Fill in the number of people in your household.

3

Fill in the median family income for your state and size of household. .... 13.

\$ 82,532.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*  
Go to Part 3. Do NOT fill out or file Official Form 122A-2

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*  
Go to Part 3 and fill out Form 122A-2.

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Case number (if known) 21-40066

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x Victoria Seaman  
Signature of Debtor 1

Date 04/05/2021  
MM / DD / YYYY

x

Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

RECEIVED/FILED  
4:35 a.m./p.m.

APR 05 2021

CLERK  
U.S. BANKRUPTCY COURT  
DISTRICT OF SOUTH DAKOTA☐ Check if this is an  
amended filing

Fill in this information to identify your case:

Debtor 1 Victoria Irene Seaman  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Dakota ☐

Case number 21-40066  
(If known)

## Official Form 108

**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.  
Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Have Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

Creditor's  
name:Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a  
*Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Creditor's  
name:Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a  
*Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Creditor's  
name:Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a  
*Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Creditor's  
name:Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a  
*Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Debtor 1

Victoria

Irene

Seaman

First Name

Middle Name

Last Name

Case number (if known) 21-40066

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

Will the lease be assumed?

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

x

Signature of Debtor 1

x

Signature of Debtor 2

Date

04/05/2021  
MM / DD / YYYY

Date

MM / DD / YYYY